



Interstate RC&D Project Application

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
Fax	
E-Mail Address	

Nature Of Project

Project Title	
Agency/Organization Representing	
Brief Project Description	
Brief Project Calendar/Timeline	

Overall Project Scope (Check One):

- Economic & Rural Development Community & Social Services
 Natural Resources Management Environmental Education

Project Objectives (Check All that Apply):

- Community Improvement
 Cultural Resources
 Economic Development
 Fish & Wildlife
 Forestry
 Information & Education (Environmental Education)
 Marketing & Merchandizing
 Natural Resources Improvement
 Recreation & Tourism
 Waste & Waste Utilization
 Water & Water Quality
 Other: _____

Project Impact – Direct & Indirect

Counties Directly Impacted by Project:

- Henry
 Mercer
 Rock Island
 Muscatine
 Scott

Interstate RC&D is an equal opportunity provider and employer.

# Potential Benefactors Directly Impacted:	
# Potential Benefactors Indirectly Impacted	
List of Potential Partners:	

Nature of Request

- | | |
|---|---|
| <input type="checkbox"/> Grant Research (Not to exceed \$45/hr) | <input type="checkbox"/> Fiscal Agent (5% Administrative Fee) |
| <input type="checkbox"/> Grant Writing (Not to exceed \$45/hr) | <input type="checkbox"/> Special Request (i.e. writing 501(c)(3) application \$150 fee) |
| <input type="checkbox"/> Grant Administration | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Meeting Facilitation | i.e.; strategic planning; conference/meeting planning |

* Grant research and grant writing fees applied on a project by project basis.

Finances

Total Anticipated Project Costs	
Itemization of Costs if possible	
Other Potential Funding Sources and Amounts	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. Interstate RC&D will not charge an hourly fee for the time devoted by federal staff assisting with each project. I do agree to pay the \$20 non-refundable application fee, submitted with this application. Additionally, I agree to reimburse Interstate RC&D for negotiated operational expenses incurred on this project and/or a tax deductible charitable contribution.

Name (printed)	
Signature	
Date	

Please return this form along with application fee to Interstate RC&D; 3020 East 1st Avenue; Milan, IL 61264. Any questions please contact us at 309-764-1486 extension 4.

Council Use Only

Does it meet Interstate RC&D's vision? Yes or No

Does it meet Interstate RC&D's mission? Yes or No

Does it meet Interstate RC&D's area plan objectives? Yes or NO

Adoption Date: _____

Denied Date: _____

Interstate RC&D President

Date